

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (G check if this is an amendment and name has changed, and indicate change.) Gold Reef International, Inc.

Filing Under (Check box(es) that apply):

Rule 504 Rule 505 Rule 506 X

Section 4(6) ULOE

Type of Filing:

New Filing

Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

(check if this is an amendment and name has changed, and indicate change.)

Gold Reef International, Inc.

Address of Executive Offices 8626 Tesoro Drive, Suite 801

(Number and Street, City, State, Zip Code) Telephone Number (including Area Code)

210-821-6511

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (including Area Code)

(if different from Executive Offices)

Brief description of Business 181 University Avenue, Suite 2200 Toronto, ON Canada M5H 3M7

Type of Business Organization

X corporation business trust limited partnership, already formed limited partnership, to be formed

other (please specify):

PROCESSED

Month Year 12 00

Actual or Estimated Date of Incorporation or Organization:

X Actual

G Estimated

JAN **2 4** 2007

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State:

CN for Canada; FN for other foreign jurisdiction)

CN

THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this from. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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| 2. Enter the information reques | sted for the follo | wing: | • | |
|--|-------------------------|---|--|--|
| Each pro Each ber equity securities of the iss | tettetat owner na | uer, if the issuer has becaving the power to vote | en organized within the e or dispose, or direct t | past five years; he vote or disposition of, 10% or more of a class of |
| , , | | | | orate general and managing partners of partnership |
| | | | | rate general and managing partners of partnership |
| | | ng partner of partnersh | | |
| Check Box(es) that Apply: | □ Promoter | □Beneficial Owner | Executive Officer | ■ Director General and/or Managing Partner |
| Full Name (Last name first, if it O'Donnell, John F. | | | | |
| Business or Residence Address 181 University Avenue, Suit Toronto, Ontario M5H 3M7 | e 2200 | Street, City, State, Zip | Code) | |
| Check Box(es) that Apply: | ☐ Promoter | ☐Beneficial Owner | ☐ Executive Officer | ■ Director ☐ General and/or Managing |
| Full Name (Last name first, if in Polinsky, Maxwell A. | ndividual) | | | Partner |
| Business or Residence Address 181 University Avenue, Suit Toronto, Ontario M5H 3M7 | (Number and ! e 2200 | Street, City, State, Zip (| Code) | |
| Check Box(es) that Apply: | ☐ Promoter | ☐Beneficial Owner | ☐ Executive Officer | ■ Director ☐ General and/or Managing |
| Full Name (Last name first, if ir Shaffer William L. | ndividual) | | | Partner |
| Business or Residence Address 181 University Avenue Suite Toronto, Ontario M5H 3M7 | (Number and S 2200 | Street, City, State, Zip (| Code) | |
| Check Box(es) that Apply | ☐ Promoter | ☐Beneficial Owner | ☐ Executive Officer | ■ Director ☐ General and/or Managing |
| Full Name (Last name first, if in McBride Brian A. | dividual) | | | Partner |
| Business or Residence Address 181 University Avenue Suite Toronto, Ontario M5H 3M7 | (Number and S 2200 | Street, City, State, Zip (| Code) | |
| Check Box(es) that Apply: | ☐ Promoter | ☐Beneficial Owner | ☐ Executive Officer | ■ Director □ General and/or Managing |
| Full Name (Last name first, if in Wiebe Clifford A. | dividual) | | | Partner |
| Business or Residence Address 181 University Avenue Suite Toronto, Ontario M5H 3M7 | (Number and S 2200 | treet, City, State, Zip C | ode) | |
| Check Box(es) that Apply: | ☐ Promoter | Beneficial Owner | ☐ Executive Officer | ☐ Director☐ General and/or Managing |
| Full Name (Last name first, if in Voctker Family Ltd Partners | diviđual) hip | | | Partner Fritz Voelker |
| Business or Residence Address 8626 Tesoro Drive Suite 801 San Antonio, Texas 78217 | (Number and S | treet, City, State, Zip C | Code) | |
| Check Box(es) that Apply: | ☐ Promoter | □Beneficial Owner | ☐ Executive Officer | ■ Director ☐ General and/or Managing |
| Full Name (Last name first, if inc Addington, Crandall | dividual) | • | | Partner |
| Business or Residence Address 8626 Tesoro Drive Suite 801 San Antonio, Texas 78217 | (Number and S | treet, City, State, Zip C | ode) | |
| Check Box(es) that Apply: | ☐ Promoter | ☐Beneficial Owner | Executive Officer | <u>■ Director</u> □ General and/or Managing |
| Full Name (Last name first, if inc Kost, Lou | dividual) | | | Partner |
| Business or Residence Address 8626 Tesoro Drive Suite 801 San Antonio, Texas 78217 | (Number and Si | treet, City, State, Zip C | ode) | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING

| | Has the iss | uer sold, or | does the iss | suer intend | to sell, to n | on-accredit | ed investor | s in this offe | ering? | ****************** | | | √o X |
|--|--|--|---|---|--|--|------------------------------|------------------------------|-------------------------------|---|----------------------------------|---|----------------|
| | | | | | Answ | er also in A | Appendix, C | olumn 2, if | filing unde | r ULOE. | | 6 = ^/ | 20 |
| • | what is the | muminiti ; | investment | uiat Will De | accepted t | rom any ind | utviauai? | ************** | | ************* | | \$ 5,00 Yes N | 10 10 |
| | Enter the i similar rem associated dealer. If i | nformation uneration f person or a | nit joint own requested for solicitati gent of a b ive (5) pers er only. | for each poion of purch roker or de | erson who l hasers in co caler registe | has been or onnection we red with th | rith sales of ie SEC and | securities i | in the offer state or stat | ing. If a p es, list the | erson to be name of th | X nmission listed is a ne broker | or an or |
| ull Name | (Last name | first, if ind | lividual) | | | | | | | | | | |
| usiness o | r Residence | : Address (N | Number and | l Street, Cit | y, State, Zip | o Code) | | | | | | | |
| ame of A | ssociated B | Broker or De | ealer | | | | | | | | | | |
| | | | s Solicited k individual | | | | | | | *************************************** | G | All Stat | es |
| [AL] [IL] [MT] [RI] | [AK] [IN] [NE] [SC] | [AZ] [IA] [NV] [SD] | [AR] [KS] [NH] [TN] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [GI] [MS] [OR] [WY] | [ID] [MO] [PA] [PR] | |
| oll Name | (Last name | first if ind | (lanhivil | | | | | | | | | | |
| usiness or | r Residence | : Address (N | Number and | Street, Cit | y, State, Zij | Code) | | | | | | | |
| ame of As | ssociated B | roker or De | ealer s Solicited (| or Intends t | o Solicit Pu | ırchasers | | | | | | | |
| ame of As | ssociated B | roker or De | caler | or Intends t | o Solicit Pu | ırchasers | | | | | G | All State | es |
| tates in W (Chec | ssociated B /hich Person ck "All Stat [AK] [IN] [NE] | n Listed Ha es" or check [AZ] [IA] [NV] | ealer s Solicited of k individual [AR] [KS] [NH] | or Intends t I States) [CA] [KY] [NJ] | o Solicit Pu (CO) [LA] [NM] | Irchasers [CT] [ME] [NY] | [DE] [MD] [NC] | [DC] [MA] [ND] | [FL] [MI] [OH] | [GA] [MN] [OK] | [GI] [MS] [OR] | [ID] [MO] [PA] | _ |
| ame of Astates in W (Checonomics (Checonomics) [AL] [IL] [MT] [RI] | ssociated B /hich Person ck "All Stat [AK] [IN] [NE] | n Listed Ha es" or check [AZ] [IA] [NV] | ealer s Solicited of k individual [AR] [KS] [NH] | or Intends t I States) [CA] [KY] [NJ] | o Solicit Pu (CO) [LA] [NM] | Irchasers [CT] [ME] [NY] | [DE] [MD] [NC] | [DC] [MA] [ND] | [FL] [MI] [OH] | [GA] [MN] [OK] | [GI] [MS] [OR] | [ID] [MO] [PA] | _ |
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| tates in W (Chec [AL] [IL] [MT] [RI] ull Name | ssociated B /hich Person [AK] [IN] [NE] (Last name r Residence ssociated B | n Listed Ha es" or check [AZ] [IA] [NV] first, if ind c Address (N | ealer Solicited of k individual [AR] [KS] [NH] Sividual) Number and ealer | or Intends t I States) [CA] [KY] [NJ] | io Solicit Pu [CO] [LA] [NM] | [CT] [ME] [NY] | [DE] [MD] [NC] | [DC] [MA] [ND] | [FL] [MI] [OH] | [GA] [MN] [OK] | [GI] [MS] [OR] .[SC] [S | [ID] [MO] [PA] D] [Th | N] |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box G and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

| Type of Security Debt | Aggregate Offering Price \$ | Amount Already Sold |
|---|---|----------------------------|
| Equity | \$3,000,000 | <u>\$1,115,250</u> |
| G Common G Preferred | | |
| Convertible Securities (including warrants) | \$ | \$ |
| Other (Specify) | \$ | \$ \$ |
| Total | \$ 3,000,000 | \$1,115,250 |
| Answer only in Appendix, Column 3, if filing under ULOE | | |
| 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "1" if answer is "none" or "zero." | | |
| | Number | Aggregate Dollar Amount |
| | Investors | of Purchases |
| Non-accredited Investors | 34 | \$1,115,250 |
| Total | 0 | \$0 |
| Answer also in Appendix, Column 4, if filing under ULOE. | | |
| If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. | | |
| Type of Security | Offering Price | Amount Already Sold |
| Debt | \$ | \$ |
| Equity | \$ | \$ |
| 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| Transfer Agent's Fees | | \$ |
| Printing and Engraving Costs | | \$ |
| Legal Fees | *************************************** | \$2,000 |
| Accounting Fees | ••••• | \$2,000 |
| Engineering Fees | | \$ |
| Sales Commissions (specify finders' fees separately) | | \$ |
| Other Expenses (identify) | | \$ |
| Total | • | \$ <u>4,000</u> |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| b. | Enter the difference between the aggregate offering price given in response to Part C - Quexpenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gro issuer." | estion 1 and total ss proceeds to the | \$1,111,250 | |
|----|---|--|-------------|-------------|
| 5. | Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be upurposes shown. If the amount for any purpose is not known, furnish an estimate and check the the estimate. The total of the payments listed must equal the adjusted gross proceeds to the response to Part C - Question 4.b. above. | e box to the left of | | |
| | Salaries and fees | G \$ | G\$ | |
| | Purchase of real estate | G \$ | G\$ | |
| | Purchase, rental or leasing and installations of machinery and equipment | G \$ | G \$ | |
| | Construction or leasing of plant buildings and facilities | g \$ | G \$ | |
| | Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer | | | |
| | pursuant to a merger) | G \$ | G\$ | |
| | Repayment of indebtedness | g \$ | G\$ | |
| | Working capital | | x | \$1,111,256 |
| | | g \$ | G\$ | |
| | Column Totals | x \$ <u>0</u> | X | \$1,111,250 |

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signar constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished or issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)

Gold Reef International, Inc.

Total Payments Listed (column totals added)

Name of Signer (Print or Type) Lou Kost

Signature

Date

x

-TL 01/11/07

Title of Signer (Print or Type)
Secretary/Treasurer & Director

ATTENTION

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?

Yes No

See Appendix, Column 5, for state response.

2.

The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.

- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)
Gold Reef International, Inc.

Name (Print or Type)
Lou Kost

Signature

Date

01/11/07

Title (Print or Type)

Secretary / Treasurer & Director

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

| 1 | 2 | | 3 | | | 5 | | | |
|-------|--|-----|--------------|--------------------------------------|---------------------|--|----------|-----|------------|
| | Intend to sell to non-accredited investors in State (Part B-Item 1) | | | offering price | e ate (Part (| Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | |
| State | Yes | No | | Number of Accredited Investors | | Number of Non-accredited Investors | . | W. | |
| AL | 165 | 140 | | investors | Amount | investors | Amount | Yes | No |
| | | | | | | | | | |
| AK | | | | | | | | | |
| AZ | | | | | | | | | |
| AR | | | | | | | | | |
| CA . | | | | | | | | | |
| со | | | | | | | | | |
| CT | | X | Common Stock | 1 | 25,000 | 0 | 0 | | x |
| DE | | x | Common Stock | 1 | 75,000 | 0 | 0 | | x . |
| DC | | | | | | | | | |
| FL | | | | | | | | | |
| GA | | X | Common Stock | 1 | 7,500 | 0 | 0 | | x |
| НІ | | | | | | | | | |
| ID | | | | | | | | | |
| IL | | | | | | | | | |
| IN | | | | | | | | | |
| IA | | x | Common Stock | 2 | 167,500 | 0 | 0 | | x |
| KS | | | | | | | | | |

APPENDIX

| 1 | 2 | : | 3 | | | 4 | | 5 | |
|-------|--|----|--|--------------------------------------|--------------|---|--------|-----|-----|
| | Intend to sell and aggreg to non-accredited investors in State | | Type of security and aggregate d e (Part C-Item 1) | offering price | ate (Part | Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-accredited Investors | Amount | Yes | No |
| LA | | | | | | | | | 710 |
| | | | | | | | | | |
| ME | | | | | | | | | |
| MD | | | | | | | | | |
| MA | | | | | | | | | |
| | | | | | | | | | |
| MI | | X | Commom Stock | 1 | 31,250 | 0 | 0 | | X |
| MN | | | | | | | | | |
| | | | | | | | | | |
| MS | | | | | | | | | |
| МО | | | | | | | | | |
| MT | | | | | | | | | |
| | | | | | | | | | |
| NE | | | | | | | | | |
| NV | | | | | | | | | |
| NH | | | | | | | | | |
| | | | | | | | | | |
| NJ | | | | | | | | | |
| NM | | X | Common Stock | I | 8,750 | 0 | 0 | | X |
| NY | | | | | | | | | |
| | | | | | | | | | |
| NC | | | | | | | | | |

ND

OH X Common Stock 2 87,500 0 0 X

APPENDIX

| 1 | 2 | | 3 | | | 5 | | | |
|-------|--------------------|---|-------------|-------------------------------------|---------|---|--------|-----|----|
| | to non- investo | Intend to sell and aggregate to non-accredited investors in State (Part B-Item 1) Type of security and aggregate (Part C-Item 1) | | offering price offering in state | (Part C | Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | |
| State | Yes | No | | Accredited Investors | Amount | Non-accredited Investors | Amount | Yes | No |
| ок | X | c | ommon Stock | 1 | 6,250 | 0 | 0 | | X |
| OR | | | | | | | | | |
| PA | | | | | | | | | |
| RI | | | | | | | | | |
| SC | X | C | ommon Stock | 1 | 50,000 | 0 | 0 | | X |
| SD | | | | | | | | | |
| TN | | | | | | | | | |
| TX | X | C | ommon Stock | 22 | 556,500 | 0 | 0 | | x |
| UT | | | | | | | | | |
| VT | | | | | | | | | |
| VA | | | | | | | | | |
| WA | X | C | ommon Stock | 1 | 100,000 | 0 | 0 | | X |
| wv | | | | | | | | | |
| WI | | | | | | | | | |
| WY | | | | | | | | | |
| PR | | | | | | | | | |